

PTO/SB/21 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

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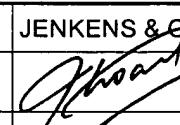
Total Number of Pages in This Submission

Application Number	10/734,925-Conf. #2233
Filing Date	December 12, 2003
First Named Inventor	Axel L. Bernhard
Art Unit	3762
Examiner Name	G. R. Evanisko
Total Number of Pages in This Submission	70828-00002USPX

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Restriction Amendment/Reply (Office Action dated 9/22/06) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Extension (4 mos.) Return Receipt Postcard
Remarks		

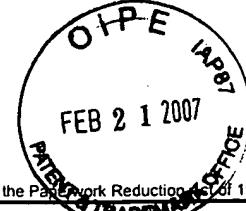
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	JENKENS & CALCHRIST, A PROFESSIONAL CORPORATION		
Signature			
Printed name	Shoailb A. Mithani		
Date	February 16, 2007	Reg. No.	L0067

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: 2/16/07

Signature: Carol Marsteller (Carol Marsteller)



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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

Effective on 12/08/2004.

FEE TRANSMITTAL For FY 2006

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$)	1,590.00
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Complete if Known	
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Art Unit	3762
Attorney Docket No.	70828-00002USPX

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 10-0447 Deposit Account Name: Jenkens & Gilchrist, a Professional Corporation

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
- =	x	=		

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)
- =	x	=			

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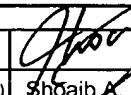
3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50	(round up to a whole number) x	=	

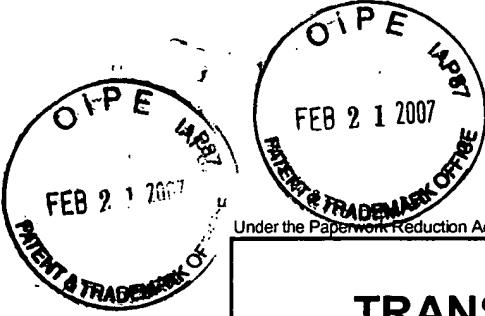
4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)
 Other (e.g., late filing surcharge): 1254 Extension for response within fourth month 1,590.00

SUBMITTED BY		Registration No.	Telephone
Signature		(Attorney/Agent) L0067	(214) 855-4630
Name (Print/Type)	Shaib A. Mithani	Date	February 16, 2007

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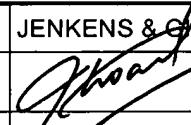
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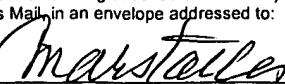
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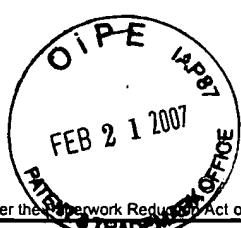
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First Named Inventor	Axel L. Bernhard
Examiner Name	G. R. Evanisko
Art Unit	3762
Attorney Docket No.	70828-00002USPX

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-	-	=	=	<u>Fee (\$)</u>

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<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
-	-	=	=

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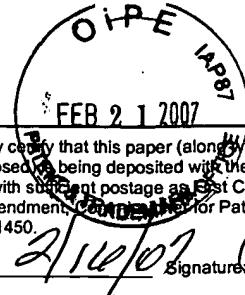
1,590.00

SUBMITTED BY		Registration No. (Attorney/Agent)	L0067	Telephone (214) 855-4630
Signature				Date February 16, 2007
Name (Print/Type)	Shoaib A. Mithani			

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Dated: 2/16/07 Signature: Carol Marsteller
(Carol Marsteller)

Docket No.: 70828-00002USPX
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Axel L. Bernhard et al.

Application No.: 10/734,925

Confirmation No.: 2233

Filed: December 12, 2003

Art Unit: 3762

For: **ELECTRO STIMULATION TREATMENT
APPARATUS AND METHOD**

Examiner: G. R. Evanisko

RESPONSE TO RESTRICTION REQUIREMENT

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

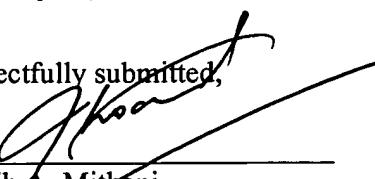
Dear Sir:

In response to the restriction requirement set forth in the Office Action mailed September 22, 2006, Applicant hereby provisionally elects claims 1, 3, and 21 (Group I) for continued examination.

The Examiner has required restriction between claims 1, 3, and 21 (Group I), claims 4-12 (Group II), and claims 13-14, 16-19, and 22 (Group III).

Dated: February 16, 2007

Respectfully submitted,

By 
Shoaib A. Mithani
Registration No.: L0067
JENKENS & GILCHRIST, A PROFESSIONAL
CORPORATION
1445 Ross Avenue, Suite 3700
Dallas, Texas 75202
(214) 855-4500
Attorneys For Applicant